	PAICN	Effe	טאט		12	78	3116	08					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
	TOTAL CLAIM	S	3	30				RATE		٦	RATE	FEE	
FOR			NUMBE	NUMBER FILED		NUMBER EXTRA		SIC FE	FEE 385.0	0 05	BASIC FE		
7	OTAL CHARGE	ABLE CLAIMS	20 m	30 minus 20= *		. 10		 (\$ 9=		1	V610		
INDEPENDENT CLAIMS				minus 3 =	• /	7	-	X43=		OF	` 	181	
М	IULTIPLE DEPE	NDENT CLAIM I	 				-	43=	<u> </u>		X86=	18/6	
<u> </u>	If the difference	n in column d is		less than zero, enter "0" in column 2			+	145=		OR	+290=		
,				TO	DTAL		OR	TOTAL	9.36				
CLAIMS AS AMENDED - PART II							CI				OTHER		
Γ	T	(Column 1) (Column 2) CLAIMS HIGHEST				(Column 3)) <u> </u>	MALL	ENTITY	OR	SMALL	T	
AMENDMENT A		REMAINING AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE	-	RATE	ADDI- TIONAL FEE	
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		(Column 1)		(Calum		(Caliuma 0)		r. FEE		OR	ADDIT. FEE	<u></u>	
MENDMENT B		CLAIMS		(Colum		(Column 3)		—т	ADDI	7 . 1			
		REMAINING AFTER AMENDMENT		PREVIOU PAID F	JSLY	PRESENT EXTRA	R/	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
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								5= OTAL		OR	+290≈		
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7 h	Independent		Minus	***		=	X43			. t			
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM)= -		OR	X86=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE										OR A	TOTAL DDIT. FEE		
T	he *Highest Numt	per Previously Paid	For" (Total or	5 SPACE is le Independent	ss than is the h	ತ, enter "3." iighest number f		. —	priate box				
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Application or Docket Number